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Report and Recommendations of the Public Policy Committee

Sigma Pi Phi Fraternity
Public Policy Committee Report

The Grand Sire Archon appointed the Public Policy Committee in the latter part of 1998. Archon Charles V. Hamilton was selected as the Chairman and Archon James Lowell Gibbs, Jr., was selected as Vice Chairman. The Public Policy Committee established three subcommittees whose work comprise the full Committee's report: Subcommittee on Economic Empowerment, Subcommittee on Health Care, and Subcommittee on Public Funding of Alternative Education.

The principal purpose of the Public Policy Committee is "to formulate, for approval by the Executive Committee and the Grand Boulé, appropriate positions on public policy issues for the general edification of Archons and, when appropriate, for action by the Fraternity and its Subordinate Boulés."

Committee Members

Members of the Public Policy Committee included representatives from each of the five regions of Sigma Pi Phi:

Charles V. Hamilton, Chairman, Zeta, Northeast
James Lowell Gibbs, Jr., Vice Chairman, Beta Upsilon, Pacific
Bernard E. Anderson, Archon, Epsilon, Northeast
Roosevelt Brown, Regional Sire Archon, Pi, Western
Julius L. Chambers, Archon, Alpha Tau, Southeast
Charles J. Doneghy, Archon, Alpha Phi, Central
Robert M. Franklin, Jr., Archon, Kappa, Southeast
Jacob U. Gordon, Archon, Theta, Western
Anthony W. Hall, Jr., Past Grand Sire Archon, Nu, Western
William R. Harvey, Archon, Beta Lambda, Southeast
C. Robert Kemp, Archon, Xi, Pacific
Ackneil M. Muldrow, II, Regional Sire Archon-Elect, Gamma, Northeast
Phillip Rutledge, Archon, Alpha Eta, Central
Augustus A. White, Archon, Beta Beta, Northeast
Eddie N. Williams, Grand Sire Archon, Epsilon, Northeast

Report of the Subcommittee on Ecomonic Empowerment

The report of the Subcommittee on Economic Empowerment was informed by findings and analysis of the African American economic condition prepared by William Darity, Jr., Professor of Economics, University of North Carolina. (That document is available upon request from the national office.) The background paper, entitled, "The Economic Status of African-Americans Over the Last 30 Years," summarizes trends in employment, income, wealth, and business ownership. Following is a brief summary of the findings in the background paper, and the set of recommendations offered by the Subcommittee on behalf of the full Committee on Public Policy.

ECONOMIC STATUS OF AFRICAN AMERICANS

The economic status of African-Americans can be measured by trends in income, employment, and wealth. Since 1960, black workers on average have earned 60 percent of what whites have earned—a figure that has held constant despite significant progress in the education and employment of black workers. The ratio of black to white per-capita income, about 54 percent in 1967, had reached 69 percent for men and 95 percent for women by 1998. Black men had a median annual income of $24,000 and black women an income of $19,000. Black family median income was nearly $25,000 in 1998.

Inequality of income between black and white families has fluctuated over the past 30 years. The black/white family income ratio rose from .63 in 1967 to .65 in 1970, declined during the early 1970s, then rebounded to .654 in 1976. By the early 1980s, the ratio fell to a decades low during 1982 of .605. From 1967-90, white families with income greater than $100,000 rose from 1.9 percent to 5.8 percent, but the proportion of black families in the same income group rose from 0.4 percent to 1.3 percent. Also:

- White persons with income of $50,000 or more rose from 9 percent in 1967 to 11 percent in 1995. Black persons in that high income bracket remained virtually unchanged at less than 4.0 percent in 1967 and 4.6 percent in 1995.

- In the middle income bracket ($25,000 to $50,000), the proportion of white persons declined from 34 percent to 25 percent between 1967 and 1995. Black persons in the middle income range rose from 15 percent to nearly 20 percent over the same time period.

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But during the past thirty years, black families failed to penetrate the highest income group, $50,000 or more, as rapidly as white families. The difference is explained by the rapid growth of white men in the highest income bracket. In 1995, 6.8 percent of white men earned $75,000 or more, compared with only 2.0 percent of black men, 1.4 percent of white women, and less than one-half of one percent of black women.

Thus, over the three decades, there was rising inequality in the economic status of black and white families. The inequality is not limited to income. When white and black families have the same characteristics—income, education—and live in the same region, the median white household net worth (i.e., wealth) is still $43,143 higher than that in the median black household.

The gap in wealth (i.e., net worth) between black and white households is much wider than the income gap. Indeed, nearly one-third of all black families either had no net worth, or negative net worth, in 1998, compared with less than 10 percent of all white families.

Intraracial Trends in Income Disparity

Since 1970, there has been a steady increase within the black community in the share of income going to the top 20 percent of households, rising from 46 percent of all black income in 1970 to 50 percent in 1995. Almost all income gains (93 percent) during this period occurred among the top five percent of income earning black households. The middle 60 percent of the black population suffered the greatest decline in relative income. Their share of income shrank from 51 percent to 47 percent between 1970 and 1995.

Black family structure explains most of the intraracial income disparity. Married couples are economically stronger than single individuals and single women are poorer than married women. Married couples are the largest and most affluent family type among both black and white families.

In essence, the black community is becoming increasingly differentiated economically, into three groups: rich elite, a growing middle class and the most disadvantaged, the so-called "underclass." Three consequences stem from the social and economic transformation that has occurred in the black community during the past 30 years: improved economic status of black married couples, increasingly large proportion of poor female -

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headed households with children, and a growing proportion of blacks entering the middle income ranks.

BLACK ENTREPRENEURS, BUSINESS OWNERSHIP AND THE BLACK MIDDLE CLASS

Most early black entrepreneurs were freed slaves engaged in trades and personal services that were shunned by whites as too servile. Many were also self-employed in skilled occupations as mechanics or artisans. Many served white as well as black customers.

The expansion of the nation's economy before the Civil War indirectly spurred the entrepreneurial participation of African Americans, who were engaged in a wide variety of enterprises including merchandising, manufacturing, real estate speculation and development, construction, transportation, and mining. Catering also was an important pursuit, as documented by W.E.B. Dubois in his classic study, *The Philadelphia Negro*.

The large wave of black migration to the North in the early 20th century contributed to the demise of many black-owned businesses. Racial hostility helped sever the close relationship between black service providers and white elites. Once cut off from the white consumer market, many black-owned businesses languished. But black firms that focused on black consumers in large black population centers such as Chicago, New York, Philadelphia, Atlanta, and several other predominantly black communities often thrived in the segregated market. Black business also was adversely affected by European immigration, unfriendly public policies, and racial animus during the first third of the 20th century.

Black Capitalism

During the late 1960s, the notion of promoting black economic development through entrepreneurial activity emerged as a major issue of public and private concern. Many scholars believed that black business ownership was critically important for American race relations.

Black capitalism was promoted to achieve several interrelated goals: (1) raise the living standards for black community residents, (2) bring about the social and economic integration of ghettos into the mainstream of U.S. life, (3) create a black middle class

Report *(Continued)*

with a vested interest in maintaining capitalism, and (4) enhance black economic self-determination. Black capitalism, though vaguely defined, had two essential elements: black business ownership and location of the enterprises in or near black residential areas.

But opponents of Black Capitalism railed against it as an impractical economic development strategy that would have only a limited impact on the income of black people, would benefit only a small number of elites, and would not address the problem of black unemployment.

Nonetheless, the critics notwithstanding, Black Capitalism was championed by the Nixon Administration, and every subsequent federal administration, and many states have organized efforts to spur black business enterprise. The U.S. Department of Commerce still has the Office of Minority Business Enterprise, and the Small Business Administration attempts to assist black businesses (and other minority and female groups) in their entrepreneurial interests and pursuits.

Post Civil Rights Black Entrepreneurship

In 1968, a survey of 564 black-owned businesses in seven cities showed that 18 percent were hair shops, 15 percent were grocery stores, 10 percent were restaurants, and 7 percent were cleaning or laundry shops. The small scale of black businesses was in contrast to national retail trends of the time.

From 1977 to 1982, receipts of black businesses declined by 14 percent for sole owners, by 13 percent for partnerships, but by only 1 percent for corporations. The number of black businesses with gross sales of over $1 million increased by 15 percent to 1,129 establishments.

Through the 1980s to the present time, black businesses have increasingly gained in size and revenue. The latest list of BE 200 firms, i.e., the 200 largest black-owned industrial, service firms and automobile dealers tracked annually by *Black Enterprise* magazine had total sales of $16 billion. There were 46 companies that grossed $100 million or more in revenues. The businesses are in a wide variety of mainstream industries, including high tech communications, entertainment, and financial services.

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The Black Middle Class and Entrepreneurship

Initially, the black middle class was mostly comprised of small entrepreneurs whose economic position was achieved and maintained by drawing resources from the black community. Prior to the civil right movement, black entrepreneurs and the black middle class were synonymous.

During the 1960s, in the response to the civil rights movement, the U.S. government launched efforts to improve the economic and social position of black people through legislation and other public policies. These efforts led black people into a wide range of professions and higher income brackets, creating a visible and occupationally diverse black middle class.

Thus, today, the black middle class includes far more economic pursuits than entrepreneurship and business ownership. In fact, the great bulk of the black middle class depends on wages and salaries from employment in the corporate world and the public service, rather than returns to capital ownership. The preference of young adult black people is strongly toward private sector pursuits, but there is evidence that entrepreneurship is gaining increasing support as a career aspiration.

CONCLUSIONS

The overarching reality for African Americans during the last thirty years has been the tortuous ebb and flow of economic well being as African Americans have attempted to secure their place in the economic life of the nation. Through it all, the dominant result has been persistent, yet gradually moderating, racial inequality in American economic life.

Recent experience suggests reasons to be hopeful that future economic gains can be made. Such gains will depend, in large part, upon wise and supportive public policies. The following policy recommendations are inspired by that expectation.

POLICY RECOMMENDATIONS

The Economic Empowerment Subcommittee reviewed the evidence on the economic status of African Americans, including the incidence of poverty. Public policy recommendations to improve the African American economic status are aimed at reducing

Report *(Continued)*

racial inequality in American economic life. The following public policy recommendations, influenced by the comments of several Public Policy Committee members who were not on the subcommittee, attempt to achieve that goal.

1. African American employment and income grow, and poverty decline most in an environment of economic prosperity. Thus, we recommend that the federal government should pursue tax and spending policies designed to maintain steady, balanced economic growth. Such fiscal policy should be aimed at achieving a growth rate of real gross domestic product at 2.5 to 3.0 percent per year. Fiscal policy should rest on the foundation of a balanced budget, a progressive tax system, and federal spending that is commensurate with the rate of inflation.

2. Economic growth is strengthened by full participation in the global marketplace. Thus, we recommend that the federal government should pursue international economic policies that support an expansion of U.S. exports, while maintaining an open market for imports. We recommend policies that will strengthen fair trade, international financial transparency, and stable exchange rates. Negotiated trade agreements, however, should include protection for international core labor standards, human rights, and protection of the global environment.

3. The economic status of African Americans is influenced significantly by their capacity to participate in the labor market. We recommend, therefore, that the federal government should maintain major investment in education and skills development, especially among the economically disadvantaged population, in order to prepare youth for productive employment in well paying jobs. This goal also should be pursued by providing incentives to the private business sector to increase its investment in skills training for lower paid employees.

4. The economic status of African Americans will be improved significantly in an environment of equal opportunity. Thus, we recommend that federal, state, and local governments should strengthen their enforcement of anti-discrimination policies, especially affirmative action in employment, business, and commercial life. Civil rights enforcement agencies should receive the funding and staffing necessary to root out discrimination and to assure the full participation of African Americans in all spheres of the nation's economic life.

Report *(Continued)*

5. A major goal of public policy should be to narrow the vast disparity in wealth among population groups in our nation. Thus, we recommend tax policies that will encourage saving, personal investment, and the improvement of net worth among American families. Such policies will be disproportionately beneficial to African American families, and will help improve their wealth position. For example, while African American families currently have a median income equal to 61 percent of the average family in American, African American wealth is less than 10 percent of other families. Among the specific policies that would be helpful in narrowing the gap are:

   (A) to raise the cap for tax exempt investment in individual retirement accounts to $10,000 for families with an annual income of up to $150,000.

   (B) to increase the level and expand coverage of the earned income tax credit for working families.

While the above recommendations are for public policy, i.e., actions taken by the state to improve the economic status of African Americans, we believe that much can and should be done also through private and community action. Thus, we recommend that civic and community organizations in the black community should devote more time and effort to educational activities that will enhance and enlarge the knowledge of African Americans about personal finance, investment, and wealth accumulation. We encourage social, fraternal, and civic organizations to launch an educational campaign, perhaps in cooperation with black-owned asset management and other financial institutions, to promote saving and investment among African American families.

Submitted by

Bernard E. Anderson, Chair

C. Robert Kemp

Ackneil M. Muldrow II

Report of the Subcommittee on Public Funding of Alternative Education

Action Abstract

Introduction

Although the focus of our Working Group is on the public funding of alternative education, we view that issue in the context of American education as a whole.

In our work on public policy on American education we have been greatly assisted by a consultant's report, *Expanding Educational Opportunity and Identifying Alternative Means for Improving Academic Achievement*, by Edmund W. Gordon and A. Saa Meroe, of Gordon and Gordon Associates, referred to hereafter as Gordon/Meroe, which summarizes and analyzes a wide range of literature on American education. We urge Archons of Sigma Pi Phi to read this thoroughly researched report. We also have relied heavily on *School Choice: Abundant Hopes, Scarce Evidence of Results*, by Bruce Fuller, et al., issued by Policy Analysis for California Education (PACE) of the University of California, Berkeley, and Stanford University, referred to hereafter as the PACE Report.

Sigma Pi Phi notes with concern the shortcomings of American public education and the myriad ways in which it produces poorer outcomes for African Americans, for some other students of color, and for some white students, particularly those from families of lower socio-economic standing, all groups relatively disadvantaged by American public education.

Many of the remedies for the extensive shortcomings of American public school education are well-known and well-documented in research on education and the literature on educational policy. While we refer to them as "reforms," their validity has been long recognized. Indeed they are simply sound educational practice. Embodied in our first recommendation, these reforms focus on the needs and capacities of the schools per se. Widespread adoption of these core educational practices is necessary if our nation's work force is to be schooled well enough to be truly productive workers and if our society is to thrive.

Recommendations

Recommendation One: Sigma Pi Phi supports the implementation of school reforms widely recognized as efficacious, including: better training for teachers; placing the most experienced teachers in classrooms with greater earning problems; holding high expectations for all students; and bringing about smaller average classroom size.

Implementing these key educational practices requires that our society recognize the distinction between educational equality, the demand that everyone be regarded as identical and treated equally, and educational equity, distributing education resources according to the varying, differential needs of particular groups of students. This distinction between educational equality and educational equity also underlies our second recommendation.

Recommendation Two: Sigma Pi Phi recommends that the greatest educational resources be allocated to those schools which face the most difficult task, training students who, for a variety of reasons not of their own making, are the most educationally disadvantaged and at risk. Clearly such schools are the most in need of well-trained, appropriately credentialed, experienced teachers; of smaller classes; and of a school milieu in which high expectations are held out for all students.

Most Americans are educated in traditional public schools. For the foreseeable future there is no doubt that by far the majority of them will continue to be. Because public schooling is the keystone of American education, the level of financial undergirding of that schooling is critical.

Recommendation Three: Sigma Pi Phi recommends that the per pupil funding allocated to traditional public schools not only be maintained but, in line with Recommendation Two, increased in order to put in place those reforms, mentioned in Recommendation One, which are universally recognized as desirable.

There is widespread public discussion of educational reforms that eschew broad, systemic reform of traditional public schools in favor of establishing or proliferating alternative schools. Among the most promoted of the several types of alternative schools are charter schools. They are publicly chartered and—at least partially—publicly funded. While charter schools are purported to be academically superior to traditional public schools, research has yet to demonstrate unequivocally that they are better. They are unproven. Moreover, studies have shown that, because of the ways in which public funds are allocated to schools, widespread establishment of charter schools would threaten the financial underpinning of public education.

Recommendations *(Continued)*

Recommendation Four: Sigma Pi Phi does not support public funding of charter schools. We recognize that charter schools already exist. However, we view these extant schools as an experimental "pilot" group. But, because their superiority has not been unequivocally demonstrated, we propose that they be closely monitored.

Recommendation Four-A: Since the ability of charter schools to increase student academic performance has not been clearly demonstrated, Sigma Pi Phi proposes that federal and state agencies and relevant non-governmental organizations agree on a rigorous research design for studies to better evaluate the education processes of charter schools and their academic outcomes.

In short, we support the PACE Report's advocacy of the designation of precise and straightforward outcome measures and assessment procedures pertaining to charter schools by government agencies and private foundations (PACE:56-58,89).

It is possible that such rigorous research will confirm what supporters of the charter school concept can now only assert, that some of the innovations incorporated by charter schools are educationally effective and offer alternatives suitable for adoption by public schools (PACE:56,87).

Recommendation Four-B: Sigma Pi Phi also proposes a coordinated federal/state policy study to determine how any successful dimensions of the existing pilot group of charter school programs could be transferred to public schools.

To adequately explore the potential of charter schools to educate a wide variety of students, with varying backgrounds, abilities, and educational needs, we believe that the pilot group of charter schools should vary in their goals, their design, and the composition of their student bodies and their teaching staffs.

Recommendation Four-C: For the existing group pilot group of charter schools, Sigma Pi Phi encourages a public policy that leads to more of those schools being designed to educate student bodies that are diverse in terms of ethnicity, socio-economic status, and academic background (including those who are academically disadvantaged).

Until the policies contained in Recommendations Four-A, Four-B, and Four-C have been implemented we take the following position:

Recommendations *(Continued)*

Recommendation Five: Sigma Pi Phi discourages any proliferation of charter schools until and unless solid evidence of their ability to boost student achievement is at hand.

A second widely discussed school-choice reform is the use of school vouchers to fund attendance at alternative schools, including charter schools. Underlying the publicly funded school voucher strategy is a market approach that sees basic, formal education as a commodity to be purchased in a market economy. Vouchers send "customers" as individuals (parents, children, with varying backgrounds and abilities) into a "market" (highly imperfect under the best of circumstances in terms of quality and quantity of goods offered for sale) to shop for the best possible education product their inevitably limited individual voucher can buy. Given the small number of charter schools and other alternative schools (including private schools and parochial schools), school vouchers would benefit only a few fortunate, "shoppers."

Moreover, short of the establishment of an entire new school system, most families will not have vouchers. Many that do will find they cannot "get in" because there are too many shoppers and not enough schools available to provide them all with places. For us, an even more telling concern is that the educational needs of disadvantaged populations are too vast, and too multi-faceted to be dealt with by the market, by the choice approach.

We believe that a publicly funded school voucher system could only benefit a few, in a situation where many need access to a sounder educational setting. We also believe that it would further disadvantage at, risk students, inasmuch as their parents would likely be least knowledgeable of the system and how to "work" it. We believe that widespread adoption of a school voucher system would imperil the funding base of traditional public schooling. Finally, we note that a central issue for both charter schools and vouchers is the potential for education resegregation (Gordon/Meroe:35-36).

Recommendation Six: Sigma Pi Phi does not support the implementation of a publicly funded school voucher system.

We also note that adequate support for schooling involves more than schools per se. It goes beyond their needs and their capacities. Schools alone cannot ensure strong academic outcomes. A documented source of underachievement of ethnic minority students is the relative absence of capital resources, including social capital. Research has shown that schools work most effectively when they are augmented by economic and social stability in the family.

Recommendations *(Continued)*

Recommendation Seven: Sigma Pi Phi urges public policies that contribute to raising the living standards of all citizens by increasing employment opportunities, wealth creation opportunities, housing quality, and health care; as well as the continued implementation of civil rights.

Research also has shown that schools work most effectively when they are augmented by the active involvement of families, parents, and community organizations. Several successful programs around the country, rooted in substantial educational research, have demonstrated the value of "supplemental education," learning experiences that take place outside of the school in family and community-based activities. Such pro-academic community-based initiatives and cultures support academic achievement within family, home, peer, and community environments as well as the school environment. These efforts supplementtraditional public schooling while charter schools and vouchers would supplant it.

Recommendation Eight: Sigma Pi Phi supports the development of public policies that provide moral and financial support for programs that promote supplemental education, increasing learning opportunities in family, home, peer, and community settings.

Summary

Sigma Pi Phi underscores the need for improving the academic outcomes for African American students, for other (especially non-Asian Pacific Islander) students of color, and for white students from lower socio-economic backgrounds. We endorse giving policy and financial priority to proven educational reforms, long recognized as strengthening educational outcomes.

Although we recognize that other, new innovative practices may emerge from further experience with charter schools as alternatives to traditional public schools, we do not support the proliferation of charter schools until their practices and outcomes have been rigorously evaluated and proven effective for a wide variety of students. In this vein, those charter schools that do exist should be seen as pilot schools. Therefore, among them should be schools that are directed at minority students and at student bodies that are diverse in many dimensions.

Similarly, we do not support the use of publicly funded vouchers as a means of supporting charter schools or non-traditional alternative schools, either public or private. Indeed, we strongly assert that the funding of experimental alternative education should not be at the expense of strengthening traditional public education by widely accepted, tried-and-true systemic reforms.

Finally, we support public policies that recognize that not all education takes place in the school. Students from families with higher incomes have a home environment in which more learning occurs and they bring more academic readiness to the school. Therefore, we support initiatives that enhance the level and the stability of families and family income. Similarly, we also endorse community-based initiatives that promote academic achievement in a wide variety of settings: the family, the home, the peer group, and the community.

Submitted by

James Lowell Gibbs, Jr., Chair

Charles V. Hamilton

Charles J. Doneghy

Report of the Subcommittee on Health Care

Executive Summary

Recently, the U.S. Department of Health and Human Services estimated that an additional 60,000 African Americans die each year as a result of inequalities in health care. In August of 1998, the Department of Health and Human Services proposed an initiative to address racial disparities in health. However, the initiative has significant shortcomings in its proposal to "enhance efforts at preventing disease, promoting health and delivering appropriate care."

For over a century, the health status of African Americans has significantly lagged behind that of Euro-Americans. Despite the civil rights efforts of the past forty years, African Americans continue to face considerable barriers in their attempts to access quality health care services. These barriers include pervasive institutional and individual racism, lower levels of income and wealth, distrust of the medical profession, lack of health care coverage, and a dearth of public health programs and health promotion efforts in minority neighborhoods. Consequently, more extensive, multi-faceted strategies than those currently proposed will be needed to close this persistent gap.

From August 26 to 29, 1999, the Health Subcommittee of the Sigma Pi Phi Public Policy Committee held a conference on addressing racial disparities in health. Invited to this conference were distinguished professionals from the medical, public health, and public policy arenas. The findings from that conference, along with the subcommittee's own study and evaluation, form the basis of this report.

Recommendations

Based on its investigations, the Health Subcommittee offers the following recommendations:

Recommendation One: Intervene early. Support initiatives to improve nutrition, increase physical activity, and reduce high-risk behaviors (e.g., smoking, substance abuse, and violence in poor and urban minority populations). Target these efforts primarily toward children and adolescents, as well as incorporating initiatives for young adults and the elderly. To facilitate these efforts, we strongly recommend that schools, churches, and youth centers receive the logistic and financial support necessary to build and sustain programs designed to improve minority health status. Many good health practices are within the control of the appropriately informed individual.

Recommendation Two: Re-direct tobacco settlement dollars to minority communities for smoking cessation and substance abuse prevention and treatment programs in these communities. Use these dollars to fund additional health promotion campaigns focused on physical fitness, diet and nutrition, and the prevention of prevalent diseases.

Recommendation Three: Promote the practice of culturally competent medicine. Implement cultural competency programs in hospitals, health centers, and medical schools. These programs should demonstrate an awareness of and sensitivity to the unique cultural needs of various racial and ethnic communities. Strengthen efforts to recruit and retain minorities in schools of medicine and public health. Require that the American Medical Association, National Medical Association, medical licensing boards, and other licensing agents include "Demonstrated Cultural Competency" as a requirement for practice. Require that hospitals and health centers conduct biannual cultural competency assessments of their staff and procedures.

Recommendation Four: Improve healthcare coverage and access. Improve eligibility requirements for Medicare and Medicaid so that race and socioeconomic status do not adversely affect benefit allocation. Require that Health Maintenance Organizations (HMOs) and health insurance providers meet nondiscrimination standards. Establish programs to create better informed and prepared minority health care consumers. Also, expand coverage of drug costs.

Recommendations *(Continued)*

Recommendation Five: Strengthen the Office of Minority Health in the U.S. Department of Health and Human Services. This Office appears to lack sufficient authority and resources to carry out its mandate to eliminate disparities in health care. An extensive evaluation and review of the mission and capacity of this office should be undertaken by a commission composed of nationally recognized experts, with broad representation of persons with established reputations in minority health care issues.

Recommendation Six: Create a research and advocacy institution that is expressly focused on researching, analyzing, and advocating minority health interests. Create standards of culturally competent care. Monitor healthcare groups, hospitals, health clinics, and insurance agencies for evidence of discrimination and make instances of discrimination public. Publish an annual report card on these groups and a newsletter to be presented to legislative representatives. Provide support, training, and information to programs designed for health promotion and disease prevention.

Recommendation Seven: Educate and advocate. Sigma Pi Phi Fraternity and subordinate Boulés should launch vigorous campaigns to educate the public and political leadership about issues of African American health care, including poorer health status due to disparities in access and health promotion and disease prevention efforts.

Background and Discussion

Compared to the general population and other major racial/ethnic groups, African Americans experience higher rates of death, disease, and disability. Specifically, African Americans are at a disproportionate risk for breast and prostate cancer, cardiovascular disease, diabetes, HIV/AIDS, and death due to physical injury (e.g., homicide). Despite nearly four decades of dismantling overt racial barriers in the United States, substantial obstacles in medical care, health promotion, and disease prevention remain. These barriers have been sustained through the persistence of social forces such as racism both personally mediated and institutional income inequality, and biased allocation of health resources. Social forces, negative individual behavior, and poor choices due to lack of information and health prevention efforts have resulted in an unconscionable disparity in health care and health status for African Americans.

The enduring legacy of racism in the United States has deeply penetrated the fabric of American institutions, ideology, and practices. Racism was, and is, bolstered by behavior patterns woven into the fabric of this society, which negatively affect the economic, emotional, and physiological existence of African Americans. Societal examples include discrimination in employment and housing as well as differential education access. Examples of racism in medicine include the eugenics movement at the turn of the century and the U.S. Public Health Service's Syphilis Experiment at Tuskegee, both of which have helped create and then perpetuate a profoundly distrustful relationship between African Americans and the medical community.

Racism in medical and public health institutions impairs the establishment of links to the services that can improve the health status of African Americans. Moreover, the presence of racism affects the availability and quality of care that is delivered to the African American community. For example, several studies have shown that, compared to Euro-Americans, African Americans receive fewer needed hospitalizations and have more limited access to advanced medical techniques, particularly those that are invasive and lifesaving, and to accurate health information and diagnosis. Specifically, racism in health care delivery affects the prevalence of immunizations, coronary procedures, prescriptions for pain medication, transplant availability, prenatal care, and routine medical services, as well as of various psychiatric and mental health treatments. The level of distrust between minority communities and the medical profession serves as a significant barrier in healthcare. There are currently few, if any, efforts being made to bridge the trust gap so that the delivery of essential quality services is assured.

The widening income gap in the United States also has a significant impact on the health of African Americans. Because African Americans have a much lower per capita income and wealth base than their white counterparts, they spend a larger proportion of their income on medical care. Income level affects the ability to purchase quality medical care, healthy foods, and safe and healthy living space.

The recent evolution of the health care system toward managed care and away from fee for service continues to restrict health care availability along racial lines and socioeconomic status.

Background and Discussion *(Continued)*

None of the four available types of health care coverage (Medicare, Medicaid, employer-subsidy, and self-purchased) sufficiently serves African Americans. Inherent in each of the four are unfair constraints that limit service availability, treatment options, and access to unbiased quality of care. Inadequate health care coverage, along with other factors, limits access to care for African Americans, including hospitalization, prescriptions, preventive care, rehabilitation, and physician availability. Managed care systems, whose main purpose is to limit costs, must be monitored carefully to be sure that the quality of care is not compromised. This is especially important with minority patients who may not be as well educated as more affluent citizens about health or about their rights and options.

The lack of aggressive health promotion campaigns and innovative community-based public health efforts also diminishes the health status of African Americans. Minorities are disproportionately represented among the nation's smokers, partly due to a barrage of targeted advertisement, especially near playgrounds and schools. African American health is further impaired by the abundance of ads promoting alcohol consumption, the predominance of fast food restaurants and liquor outlets in minority neighborhoods, and the prevalence of illegal drugs. In contrast, a paucity of information is made available to minority communities concerning the availability and utilization of good health practices.

Health care should be seen as a basic right of all citizens, but with particular attention to the needs of those for whom inadequate care limits full participation in the American economy. We must support policies that enable minority patients to assert their rights and empower them to a partnership role within the health care system.

Submitted by

Augustus A. White III, Chair

Phillip Rutledge

Roosevelt Brown

Sigma Pi Phi Fraternity